

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | PAH | 67814 | 4/20/55 |
| O.I.P.E. CLASSIFIER | | 73 | 7/26/59 |
| FORMALITY REVIEW | WMD | 108231 | 4/20/59 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)..... Canceled A Appeal
÷ Restricted O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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